# PROCESSED OCT 0 1 2002 FORM D THOMSON FINANCIAL

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

### FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

2	1-45069
	OMB APPROVAL

OMB Number: 3235-0076 Expires: May 31, 2002 Estimated average burden hours per response . . . 1.00

SEC USE ONLY						
Prefix	Ser	Serial				
DA	TE RECEIVED					

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Name of Offering ( check if this is an amen	dment and name	has changed, and	l indicate	change.)	
Common Stock, Warrants and Common	Stock that Warra	nts convertible into		• ,	
Filing Under (Check box(es) that apply):	Rule 504	☐ Rule 505	X Rule	506 Section 4(	(6) ULOE
Type of Filing: New Filing Amend	lment				
	A. BASIC ID	ENTIFICATION	DATA		
1. Enter the information requested about the issue	er			, ,	
Name of Issuer ( check if this is an amendr	nent and name has	changed, and indic	cate change	(.)	
LightMaster Systems, Inc.		-	_		
Address of Executive Offices	(Number and S	treet, City, State, Zi	n Code)	Telephone Number (Inc	cluding Area Code)
2901 Tasman Drive, Suite 204, Santa C	•	,,,	r,	408-855-222	,
Address of Principal Business Operations	<del></del>	treet, City, State, Zi	n Coda)	Telephone Number (Inc	
(if different from Executive Offices)	(Number and S	ireei, City, State, Zi	p Code)	reseptione (author (the	ciuding Area Code)
<u> </u>					
Brief Description of Business					
Prism and light engine technologies					Sept. S. NED CO.
Type of Business Organization		· · · · · · · · · · · · · · · · · · ·		100	Con
	i partnership, alrea	ady formed		المسترية للمحمول	FRANCE CLOCK CONTRACTOR
			other	: limited liability compar	NEF & TO LUCE
business trust limited	l partnership, to be	e formed			
		Month	Year	100	
Actual or Estimated Date of Incorporation or Orga		11	_2001		Estimated
Jurisdiction of Incorporation or Organization: (En	nter two-letter U.S	. Postal Service abb	previation f	or State: DE	
	CN for (	Canada: FN for other	er foreign i	urisdiction)	

#### GENERAL INSTRUCTIONS

### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

#### State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

#### **ATTENTION**

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

#### A. BASIC IDENTIFICATION DATA 2. Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner Executive Officer □ Director General and/or Managing Partner Full Name (Last name first, if individual) MacKenzie, Bill Business or Residence Address (Number and Street, City, State, Zip Code) 2901 Tasman Drive, Suite 204, Santa Clara, CA 95054 Promoter Beneficial Owner Check Box(es) that Apply: Executive Officer □ Director General and/or Managing Partner Full Name (Last name first, if individual) Berman, Arthur Business or Residence Address (Number and Street, City, State, Zip Code) 2901 Tasman Drive, Suite 204, Santa Clara, CA 95054 Promoter Beneficial Owner Executive Officer Check Box(es) that Apply: Director General and/or Managing Partner Full Name (Last name first, if individual) Freeman, Gary Business or Residence Address (Number and Street, City, State, Zip Code) 2901 Tasman Drive, Suite 204, Santa Clara, CA 95054 ☐ Promoter ☐ Beneficial Owner Executive Officer ☐ General and/or Check Box(es) that Apply: Director Managing Partner Full Name (Last name first, if individual) Detro, Michael (Number and Street, City, State, Zip Code) Business or Residence Address 2901 Tasman Drive, Suite 204, Santa Clara, CA 95054 Promoter Beneficial Owner ☐ Executive Officer General and/or Check Box(es) that Apply: Director Managing Partner Full Name (Last name first, if individual) Mack-Mumford, Denis Business or Residence Address (Number and Street, City, State, Zip Code) 2901 Tasman Drive, Suite 204, Santa Clara, CA 95054 Executive Officer Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner Director General and/or Managing Partner Full Name (Last name first, if individual) Taiwan Micro Display Corp. Business or Residence Address (Number and Street, City, State, Zip Code) 195-89 Chung Hsing Rd., Sec. 4, Chutung, Hsinchu 310, Taiwan

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

	·				В. П	NFORMA	TION AB	OUT OF	FERING					
	Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?										_	es	No	
1.	Has the is	suer sold,	or does the	issuer inte	end to sell	, to non-ac	credited in	vestors in	this offeri	ng?	•••••			$\boxtimes$
				Answe	er also in A	Appendix,	Column 2,	if filing u	nder ULO	E.				
2.	What is th	e minimur	n investme	ent that wil	I be accep	ted from a	ny individ	ual?			•••••	\$	1,00	00
													es	No
3.			<del>-</del>	_	_								]	$\boxtimes$
4.	4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.													
Full	Name (Las	st name fir	st, if indiv	idual)										
Bus	iness or Re	sidence Ac	dress (Nu	mber and S	Street, City	y, State, Zi	p Code)							
Nan	ne of Assoc	iated Brok	er or Deal	er										
Stat	es in Which							1				-	٦	a
	(Check "A											. –	_	States
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	[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[AW]	[WV]	[WI]	[WY]	( P)	
Full	Name (Las	st name fir	st, if indiv	idual)										
Bus	iness or Re	sidence Ac	idress (Nu	mber and S	Street, City	y, State, Zi	p Code)			·	<del> </del>			
			<del></del>											
Nan	ne of Assoc	iated Brok	er or Deal	er										
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	(IL)	[IN]	[AZ] [IA]	[AR] [KS]	[KY]	[LA]	[CI]	[DE] [MD]	[DC] [MA]	[FL] [MI]	[GA] [MN]	[HI] [MS]	[I] [M]	-
	[TM]	[NE]	[VV]	[NH]	[NJ]	[MM]	[NY]	[NC]	[ND]	[OH]	[OK]	[MS]	[ P.	-
	[RI]	[SC]	[SD]	(TN)	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	(WI)	[WY]	[P]	
Full	Name (Las	t name fir	st, if indivi	idual)			<del>,</del>							
Bus	iness or Re	sidence Ac	Idress (Nu	mber and S	Street, City	v. State. Zi	p Code)							
						,								
Nan	ne of Assoc	iated Brok	er or Deal	er										
Stat	es in Which (Check "A									***********			All	States
	[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[1]	D]
	[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[AM]	[MI]	[MN]	[MS]	[M	
	[MT]	[NE]	[NV]	[NH]	[NJ]	[MM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	{ P2	
	[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[TV]	[VA]	[WA]	[WV]	[WI]	[WY]	[ P]	₹]

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

	C. OFFERING, PRICE, NUMBER OF INVESTORS, EXPENS	SES AND USE OF PRO	CEEDS
1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box $\square$ and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	\$0-	\$ <u>-</u> 0-
	Equity	\$ 12,500	\$_12,500
	Convertible Securities (including warrants)	\$ 8,500	\$_8,500
	Partnership Interests	\$0	\$ <u>-0-</u>
	Other (Specify) Limited Liability Company Membership Interests	\$0	<u>-0-</u>
	Total	\$_21,000	\$ 21,000
	Answer also in Appendix, Column 3, if filing under ULOE		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lipes. Enter "0" if answer is "none" or "zero."		
		Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	4	\$ 21,000
	Non-accredited Investors		<u> </u>
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C – Question 1.		
	T	Type of	Dollar Amount
	Type of Offering Rule 505	Security	Sold
		-0-	\$ <u>-0-</u> \$0-
	Regulation A		\$ -0- \$ -0-
		-0-	\$ -0- \$ -0-
	Total	-0	
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	□ \$ <u>-0-</u>
	Printing and Engraving Costs		\$ -0-
	Legal Fees		\$ 1,000
	Accounting Fees		□ \$ -0-
	Engineering Fees		□ \$ -0-
	Sales Commissions (specify finders' fees separately)		□ \$0-
	Other Expenses (identify) Finders' Fees		□ \$
	Total		□\$ 20 000

	C. OFFERING, PRICE, NUMBER OF IN	VESTORS, EXPENS	ES AND USE OF PRO	OCEEDS
	b. Enter the difference between the aggregate price given in Question 1 and total expenses furnished in response to Part C difference is the "adjusted gross proceeds to the issuer."	response to Part C - Question 4.a. This		\$_20,000
5.	Indicate below the amount of adjusted gross proceeds to the iss to be used for each of the purposes shown. If the amount fo known, furnish an estimate and check the box to the left of the e the payments listed must equal the adjusted gross proceeds to t response to Part C - Question 4.b above.	any purpose is not stimate. The total of	Payments To Officers, Directors, & Affiliates	Payments To Others
	Salaries and fees		S0	\$0
	Purchase of real estate		S0	\$0-
	Purchase, rental or leasing and installation of machinery and	l equipment	S0-	\$0-
	Construction or leasing of plant buildings and facilities		S0	\$0
	Acquisition of other businesses (including the value of secuthis offering that may be used in exchange for the assets or sissuer pursuant to a merger)	ecurities of another	\$0- \$_20,000 \$0- \$0-	\$\_20,000 \$\0-
			<b>\$</b>	\$
	Column Totals		S0-	
	Total Payments Listed (column totals added)		\$ 20	
	D. FEDE	RAL SIGNATURE		
sign	e issuer has duly caused this notice to be signed by the undersigned nature constitutes an undertaking by the issuer to furnish to the U.S primation furnished by the issuer to any non-accredited investor pure.	. Securities and Excha	nge Commission, upon	
Issı	uer (Print or Type) LightMaster Systems, Inc.	rure		Date 8 ( 6 ( 0 2
Nai	me of Signer (Print or Type)  Gary Freeman  Title of	of Signer (Print or Type Vice President of C	e) Operations and Secretar	<u> </u>

## **ATTENTION**

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

	E. STATE SIGNATURE							
1.	Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions	Yes	No					
	of such rule?		$\boxtimes$					
	See Appendix, Column 5, for state response.		<b>L</b>					

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239.500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform Limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type) LightMaster Systems, Inc.	Signature	Date 8/6/02
Name of Signer (Print or Type) Gary Freeman	Title (Print or Type) Vice President of Operations and Secretary	

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

## APPENDIX

1		2	3	4					5	
	to non-a	d to sell accredited rs in State 3-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)	and aggregate offering price offered in state (Part C-Item 1)  (if yes, a explanati explanati waiver gr (Part C-Item 2)  (if yes, a explanati explanati varier gr (Part E-Item 2)			amount purchased in State (Part C-Item 2)			
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited	Amount	Yes	No	
AL	165	NO		mvestors	Amount	Investors	Amount	168	No	
AK										
AZ ·										
AR										
CA			Common Stock & warrants to purchase Common Stock	4	\$21,000					
СО										
CT					I				,	
DE									·	
DC										
FL										
GA										
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## APPENDIX

1		2	3			4		}	5	
	Intend to non-a investor	d to sell accredited rs in State 3-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)	Disqua Under St egate Type of investor and state amount purchased in State waiver (Part E-  (Part E-			amount purchased in State (Part C-Item 2)			
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
MT									170	
NE										
ŅV					-					
NH										
NJ										
NM					ţ					
NY			·							
NC	-								,	
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